

Critical System Governance Attestation

Agency Name: **WASHINGTON STATE HOUSING FINANCE COMMISSION**

Name of Agency Contact: **PAUL EDWARDS, DEPUTY DIRECTOR**

Agency Contact Phone Number: **206-287-4462**

Name of Critical System	Name and Title of Business Sponsor	Have known problems been reviewed to ensure appropriate priority and accountability?	Have pending enhancement requests been reviewed to ensure appropriate priority and accountability?
AGENCY HAS NO CRITICAL SYSTEMS TO REPORT.			

Name of Agency Director: **KIM HERMAN**

Signature of Agency Director/Date: 